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**STATEMENT CLAIMING SMALL ENTITY STATUS  
(37 CFR 1.9(f) & 1.27(b))—INDEPENDENT INVENTOR**

Docket Number (Optional)

Applicant, Patentee, or Identifier: DURELL THOMAS MADER

Application or Patent No.: \_\_\_\_\_

Filed or Issued: \_\_\_\_\_

Title: APPARATUS FOR MAKING LEAK-PROOF CONTAINERS

As a below named inventor, I hereby state that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees to the Patent and Trademark Office described in:

- the specification filed herewith with title as listed above.  
 the application identified above.  
 the patent identified above.

I have not assigned, granted, conveyed, or licensed, and am under no obligation under contract or law to assign, grant, convey, or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern, or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- No such person, concern, or organization exists.  
 Each such person, concern, or organization is listed below.

Separate statements are required from each named person, concern, or organization having rights to the invention stating their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

DURELL T. MADER

NAME OF INVENTOR

Durell T. Mader

Signature of inventor

April 28, 2003

Date

NAME OF INVENTOR

Signature of inventor

Date

NAME OF INVENTOR

Signature of inventor

Date

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**STATEMENT BY A NON-INVENTOR SUPPORTING  
A CLAIM BY ANOTHER FOR SMALL ENTITY STATUS**

Docket Number (Optional)

Applicant, Patentee, or Identifier: Durell T. Mader

Application or Patent No.: \_\_\_\_\_

Filed or Issued: \_\_\_\_\_

Title: Apparatus for making leak-proof containers

I hereby state that I am making this statement to support a claim by Durell Thomas Mader for small entity status for purposes of paying reduced fees to the United States Patent and Trademark Office, regarding the invention described in:

- the specification filed herewith with title as listed above.  
 the application identified above.  
 the patent identified above.

I hereby state that I would qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying fees to the United States Patent and Trademark Office, if I had made the above identified invention.

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e). Note: Separate statements are required from each person, concern or organization having rights to the invention to their status as small entities. (37 CFR 1.27)

Each person, concern, or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- no such person, concern, or organization exists.  
 each such person, concern, or organization is listed below.

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

NAME OF PERSON SIGNING Suzanne Frances Van Why

TITLE IN ORGANIZATION OF PERSON SIGNING \_\_\_\_\_

ADDRESS OF PERSON SIGNING 35 North 2nd Street, Stroudsburg, Pa. 18360SIGNATURE Suzanne Frances Van Why DATE 3-31-03

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**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)****Title of Invention****APPARATUS FOR MAKING LEAK-PROOF CONTAINERS**

As the below named inventor(s), I/we declare that:

This declaration is directed to:

- The attached application, or
- Application No. \_\_\_\_\_, filed on \_\_\_\_\_,
- as amended on \_\_\_\_\_ (if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

**FULL NAME OF INVENTOR(S)**Inventor one: DURELL THOMAS MADERSignature: Durell Thomas Mader Citizen of: U.S.A.

Inventor two: \_\_\_\_\_

Signature: \_\_\_\_\_ Citizen of: \_\_\_\_\_

Inventor three: \_\_\_\_\_

Signature: \_\_\_\_\_ Citizen of: \_\_\_\_\_

Inventor four: \_\_\_\_\_

Signature: \_\_\_\_\_ Citizen of: \_\_\_\_\_

 Additional inventors are being named on \_\_\_\_\_ additional form(s) attached hereto.

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to:  Customer Number  
or Bar Code Label  OR  Correspondence address below

Name **Durell T. Mader**

Address **26 Bridge Street, Apt. 702**

City **Stroudsburg** State **Pa.** ZIP **18360**

Country **U. S. A.** Telephone **(570) 476-1134** Fax **424-1848**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) <b>Durell Thomas</b>	Family Name or Surname <b>Mader</b>
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Inventor's Signature 	Date <b>April 28, 2003</b>
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Residence: City	State	Country	Citizenship
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Mailing Address **P. O. Box 28**

City <b>East Stroudsburg</b>	State <b>Pa.</b>	ZIP <b>18301-0028</b>	Country <b>U. S. A.</b>
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**NAME OF SECOND INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
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Inventor's Signature	Date
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Residence: City	State	Country	Citizenship
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Mailing Address

City	State	ZIP	Country
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Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.